

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000063618

Entity Name: SIGNAL COMPANY

FILED  
Feb 13, 2009  
Secretary of State

## Current Principal Place of Business:

2604 DE SOTO BLVD.  
CORAL GABLES, FL 33134

## New Principal Place of Business:

## Current Mailing Address:

2250 SW 3RD AVE, STE 500  
MIAMI, FL 33129

## New Mailing Address:

FEI Number: 65-0852420

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ARCIE, NELIDA  
2000 S DIXIE HWY STE 100  
MIAMI, FL 33133 US

## Name and Address of New Registered Agent:

ARCIE, NELIDA  
2250 SW 3RD AVENUE  
STE 500  
MIAMI, FL 33129 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

02/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: V ( ) Delete  
Name: ABBASSI, KATAYOUN  
Address: 2604 DESOTO BLVD  
City-St-Zip: CORAL GABLES, FL 33134

Title: PD ( ) Delete  
Name: RAY, ABBASI  
Address: 2604 DE SOTO BLVD  
City-St-Zip: MIAMI, FL 33134

Title: SD ( ) Delete  
Name: ABBASSI, M  
Address: 2000 S DIXIE HWY STE 100  
City-St-Zip: MIAMI, FL 33133

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: ABBASSI, M  
Address: 2250 SW 3RD AVENUE, STE 500  
City-St-Zip: MIAMI, FL 33133

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MIACHAEL ABBASSI

SD

02/13/2009

Electronic Signature of Signing Officer or Director

Date